



**NTP**  
National Toxicology Program

## **Bioinformatics-based identification of assays that inform on disease hazard**

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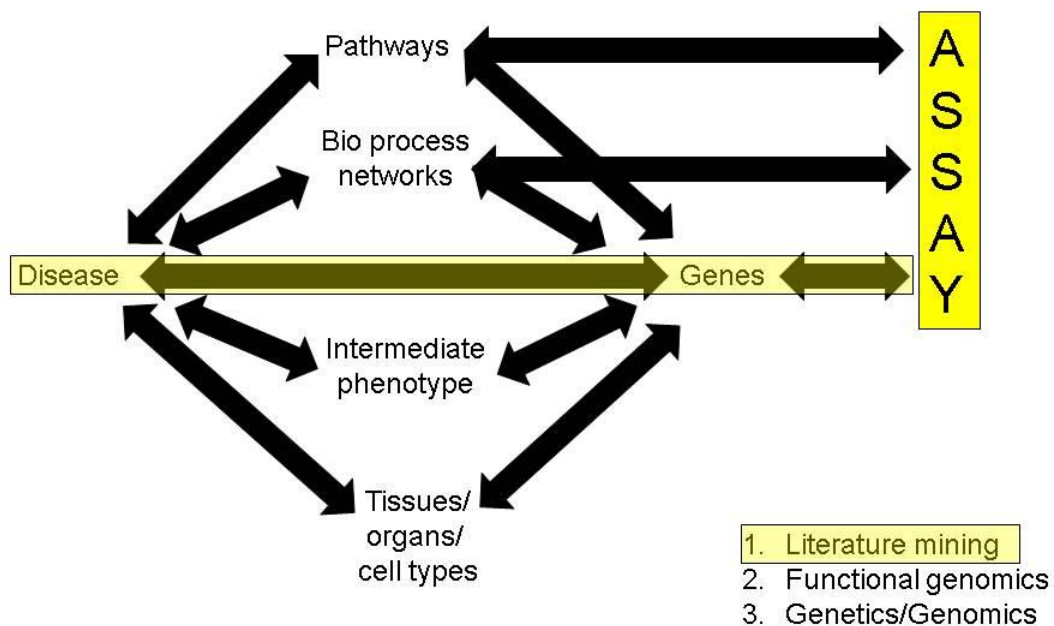
## Outline

- Goals, Overall Concept and Approach
- Data Resources and Critical Concepts
- Results of Initial Analysis
- Future Work

**Goals (fill in variables):**

- 1. Disease Y hazard is queried most effectively  
by assay A,B,C....**
- 2. Assay X queries disease hazard A, B, C...**

## From diseases to genes to assays and back again



## Approach

- Assemble list of all genes in the human genome and associated annotations
- Extract Disease-Gene relationships from database resources
- Map associated genes to human gene reference list
- Calculate cumulative score for all genes for a given disease
- Determine assay development tractability/feasibility based on a “druggability” score

## Data Resources: Literature mining

- Comparative Toxicogenomics Database (CTD), Ingenuity, GeneGo, OMIM
  - Hand curated associations between, diseases, genes, pathways, biological processes
- CoPub
  - Automated curation of associations between diseases, genes, tissues, pathways, biological processes, and pathways
  - Derived from text mining of abstracts
- GeneCards and Entrez gene
  - Automated curation of diseases/gene associations
  - Derived from text mining of abstracts
- Phenopedia (HuGE Navigator)
  - Automated curation of diseases/gene associations
  - Derived from text mining of abstracts
  - Focus on genetic association studies

## Data Resources: Functional genomics

- NextBio
  - Contains genomic signatures from a large fraction of public data deposited in GEO, ArrayExpress, dbGaP, and Cosmic databases
    - RNA expression, CNV, Somatic mutation, DNA methylation, Histone modification, DNA protein interaction, etc.
  - Identifies disease/gene/pathway relationships based on differential gene expression, DNA methylation, etc.
- Unigene Body Atlas
  - Identifies the relationship between tissues and gene-based patterns of tissue-specific expression
- GeneoGo and Ingenuity
  - Identifies the relationship between pathways/biological processes that are enriched in the gene expression from prediseased and diseased tissue

## Data Resources: Genetics

- NextBio
  - Identifies relationships between diseases/intermediate phenotypes and genes based on OMIM entries and meta-analysis of GWAS studies deposited in dbGaP
- Phenopedia
  - GWAS data curation



## Critical Concept: Druggability

- The protein encoded by a gene is considered druggable if it contains a conserved protein domain that has been shown to bind to small molecules
  - Examples: Nuclear receptors, G-protein coupled receptors, Kinases
- Druggable genome sources:
  - Ensembl
  - DrugBank
  - InterPro-BLAST
  - BioLT
  - Quiagen
  - Dharmacon
- There are 6 druggable genome resources, hence a gene gets a druggability score from 0-6



## Type 1 Diabetes Prioritized Assay Targets

	Hand curated				Automated curation						
Official Gene Name	CTD	Ingenuity	GeneGo	OMIM	Entrez Gene	CoPub	GeneCards	Phenopedia	Sum	Druggability Score	Existing Assays
cytotoxic T-lymphocyte-associated protein 4	2	2	2	2	1	1	1	1	12	4	0
insulin	2	2	2	2	1	1	1	1	12	3	0
SMT3 suppressor of mif two 3 homolog 4 (S. cerevisiae)	2	2	2	2	1	1	1	1	12	0	0
protein tyrosine phosphatase, non-receptor type 22 (lymphoid)	2	2	2	2	1	0	1	1	11	5	0
interleukin 2 receptor, alpha	2	2	2	2	1	0	1	1	11	4	0
inositol 1,4,5-triphosphate receptor, type 3	2	2	2	2	1	0	1	1	11	3	0
major histocompatibility complex, class II, DQ beta 1	2	2	2	2	1	0	1	1	11	2	0
forkhead box P3	2	2	2	2	1	0	1	1	11	2	0
SH2B adaptor protein 3	2	2	2	2	1	0	1	1	11	0	0
interferon induced with helicase C domain 1	2	2	2	2	1	0	1	1	11	0	0

\*T1D hazard may be queried most effectively by assays that evaluate CTLA4, PTPN22, IL2 activity

### Druggable targets that are not related to T1D biology

ATP-binding cassette, sub-family A (ABC1), member 1	0	0	0	0	0	0	0	0	0	6	0
dopamine receptor D2	0	0	0	0	0	0	0	0	0	6	1
nuclear receptor subfamily 5, group A, member 1	0	0	0	0	0	0	0	0	0	6	1



CTLA4 polymorphisms are associated with autoimmune disease, Type 1 Diabetes

## Association of the T-cell regulatory gene *CTLA4* with susceptibility to autoimmune disease

Hironori Ueda<sup>1</sup>, Joanna M. M. Howson<sup>1\*</sup>, Laura Esposito<sup>1\*</sup>, Joanne Heward<sup>2\*</sup>, Hywel Snook<sup>1</sup>, Giselle Chamberlain<sup>1</sup>, Daniel B. Rainbow<sup>1</sup>, Kara M. D. Hunter<sup>1</sup>, Annabel N. Smith<sup>1</sup>, Gianfranco Di Genova<sup>1,†</sup>, Mathias H. Herr<sup>1,†</sup>, Ingrid Dahlman<sup>1,†</sup>, Felicity Payne<sup>1</sup>, Deborah Smyth<sup>1</sup>, Christopher Lowe<sup>1</sup>, Rebecca C. J. Twells<sup>1</sup>, Sarah Howlett<sup>1</sup>, Barry Healy<sup>1</sup>, Sarah Nutland<sup>1</sup>, Helen E. Rance<sup>1</sup>, Vin Everett<sup>1</sup>, Luc J. Smink<sup>1</sup>, Alex C. Lam<sup>1</sup>, Heather J. Cordell<sup>1</sup>, Neil M. Walker<sup>1</sup>, Cristina Bordin<sup>1,†</sup>, John Hulme<sup>1</sup>, Costantino Motzo<sup>3</sup>, Francesco Cucca<sup>3</sup>, J. Fred Hess<sup>4</sup>, Michael L. Metzker<sup>4,†</sup>, Jane Rogers<sup>5</sup>, Simon Gregory<sup>5</sup>, Amit Allahabadia<sup>2,†</sup>, Ratnasingam Nithiyananthan<sup>2</sup>, Eva Tuomilehto-Wolf<sup>6</sup>, Jaakko Tuomilehto<sup>6,7</sup>, Polly Bingley<sup>8</sup>, Kathleen M. Gillespie<sup>8</sup>, Dag E. Undlien<sup>9,†</sup>, Kjersti S. Rønningen<sup>10</sup>, Cristian Guja<sup>11</sup>, Constantin Ionescu-Tîrgoviște<sup>11</sup>, David A. Savage<sup>12</sup>, A. Peter Maxwell<sup>13</sup>, Dennis J. Carson<sup>14</sup>, Chris C. Patterson<sup>15</sup>, Jayne A. Franklyn<sup>2</sup>, David G. Clayton<sup>1</sup>, Laurence B. Peterson<sup>16</sup>, Linda S. Wicker<sup>1</sup>, John A. Todd<sup>1</sup> & Stephen C. L. Gough<sup>2</sup>

## Type 2 Diabetes Prioritized Assay Targets

	Hand curated								Automated curation		
Official Gene Name	CTD	Ingenuity	GeneGo	OMIM	Entrez Gene	CoPub	GeneCards	Phenopedia	Sum	Druggability Score	Existing Assays
peroxisome proliferator-activated receptor gamma	2	2	2	2	1	1	1	1	12	6	1
potassium inwardly-rectifying channel, subfamily J, member 11	2	2	2	2	1	1	1	1	12	6	1
hepatocyte nuclear factor 4, alpha	2	2	2	2	1	1	1	1	12	6	1
ATP-binding cassette, sub-family C (CFTR/MRP), member 8	2	2	2	2	1	1	1	1	12	6	0
ectonucleotide pyrophosphatase/phosphodiesterase 1	2	2	2	2	1	1	1	1	12	5	0
glucagon receptor	2	2	2	2	1	1	1	1	12	4	0
neurogenic differentiation 1	2	2	2	2	1	1	1	1	12	3	0
lipase, hepatic	2	2	2	2	1	1	1	1	12	3	0
insulin receptor substrate 2	2	2	2	2	1	1	1	1	12	3	0
insulin receptor substrate 1	2	2	2	2	1	1	1	1	12	3	0

## **PPARG polymorphisms lead to differential susceptibility to T2D**

### **The common PPAR $\gamma$ Pro12Ala polymorphism is associated with decreased risk of type 2 diabetes**

David Altshuler<sup>1,2,3\*</sup>, Joel N. Hirschhorn<sup>1,3,4\*</sup>, Mia Klannemark<sup>5</sup>, Cecilia M. Lindgren<sup>1,5</sup>, Marie-Claude Vohl<sup>6</sup>, James Nemesh<sup>1</sup>, Charles R. Lane<sup>1</sup>, Stephen F. Schaffner<sup>1</sup>, Stacey Bolk<sup>1</sup>, Carl Brewer<sup>6</sup>, Tiinamaija Tuomi<sup>5,7</sup>, Daniel Gaudet<sup>8</sup>, Thomas J. Hudson<sup>1,6</sup>, Mark Daly<sup>1</sup>, Leif Groop<sup>5</sup> & Eric S. Lander<sup>1,9</sup>

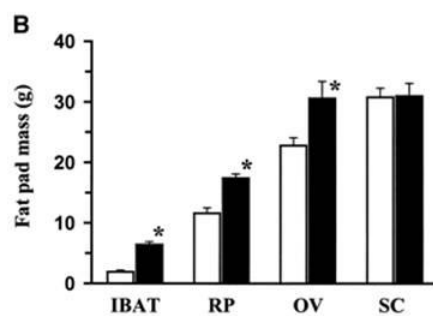
## Obesity Prioritized Assay Targets

	Hand curated				Automated curation						
Official Gene Name	CTD	Ingenuity	GeneGo	OMIM	Entrez Gene	CoPub	GeneCards	Phenopedia	Sum	Druggability Score	Existing Assays
peroxisome proliferator-activated receptor gamma	2	2	2	2	1	1	1	1	12	6	1
peroxisome proliferator-activated receptor alpha	2	2	2	2	1	1	1	1	12	6	1
serpin peptidase inhibitor, clade E (nexin, plasminogen activator	2	2	2	2	1	1	1	1	12	5	1
peroxisome proliferator-activated receptor delta	2	2	2	2	1	1	1	1	12	5	1
insulin receptor	2	2	2	2	1	1	1	1	12	5	1
adrenergic, beta-3-, receptor	2	2	2	2	1	1	1	1	12	5	1
proprotein convertase subtilisin/kexin type 1	2	2	2	2	1	1	1	1	12	5	0
ectonucleotide pyrophosphatase/phosphodiesterase 1	2	2	2	2	1	1	1	1	12	5	0
cannabinoid receptor 1 (brain)	2	2	2	2	1	1	1	1	12	5	0
neuropeptide Y	2	2	2	2	1	1	1	1	12	4	1

## PPAR $\gamma$ regulates adiposity

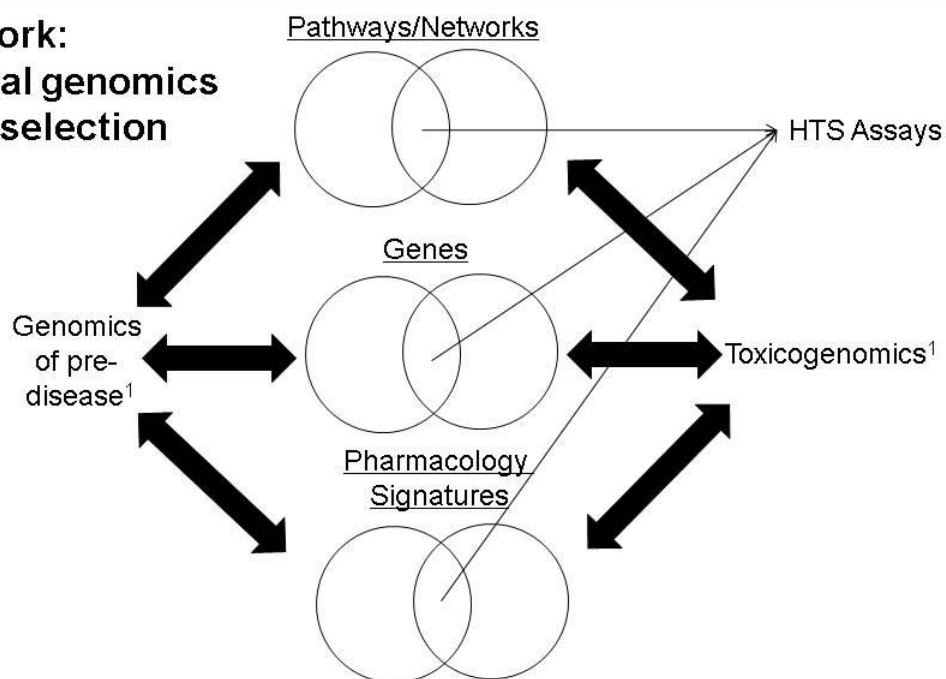
### Effects of Pioglitazone on Adipose Tissue Remodeling Within the Setting of Obesity and Insulin Resistance

Christopher J. de Souza,<sup>1</sup> Michele Eckhardt,<sup>1</sup> Karen Gagen,<sup>1</sup> Mei Dong,<sup>1</sup> Wei Chen,<sup>1</sup> Didier Laurent,<sup>2</sup> and Bryan F. Burkey<sup>1</sup>



\*27 days of pioglitazone (PPAR $\gamma$  agonist) leads to increased fat pad mass

**Future work:  
Functional genomics  
in assay selection**

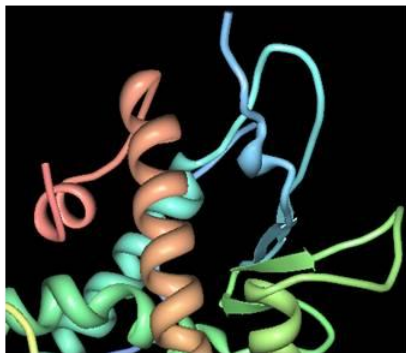


<sup>1</sup>Data to evaluate these relationships comes from NextBio, CEBS, and DrugMatrix



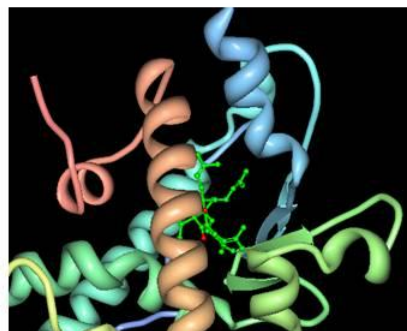
## Future Work: Consideration of target promiscuity

Human PXR Ligand Binding Domain

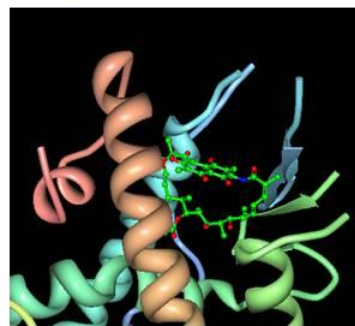


Apo

Hyperforin

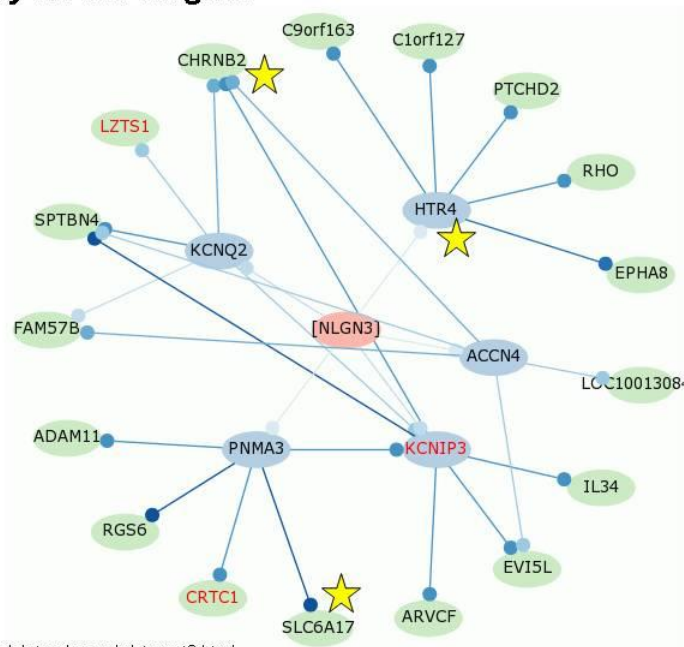


Rifampicin



Data derived from publications from the Redinbo Lab (UNC)

## Future Work: Integrate gene-gene relationships to identify novel targets



StarNet2: <http://vanburenlab.tamhsc.edu/starnet2.html>

## Summary

- We are integrating multiple genomics/bioinformatics resources to identify genes/pathways associated with disease
- Based on the associations, we plan to identify or develop *in vitro* assays that will predict chemical hazard in a disease-centric fashion
- We anticipate that the findings from screening strategies based on disease-centric assays will facilitate both the prioritization of chemicals for focused *in vivo* studies (i.e., targeted testing) and the development of integrated testing strategies that will be human centric while being more cost effective, more efficient, and more informative
- Independent efforts in this area of research are ongoing at NCGC, EPA and have been published by a group at NIEHS
  - A comparison of results will be performed following completion of these efforts

# **NTP Workshop:**

## **Role of Environmental Chemicals in the Development of Diabetes and Obesity**

**January 11-13, 2011**

**Raleigh Marriott Crabtree Valley • 4500 Marriott Drive**

<http://cerhr.niehs.nih.gov/evals/diabetesobesity/index.html>

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